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7590

02/13/2006

Paul C. Oestreich
 Morriss O'Bryant Compagni, P.C.
 136 South Main Street, Suite 700
 Salt Lake City, UT 84101



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<u>Paul C. Oestreich</u>	(Depositor's name)
<u>[Signature]</u>	(Signature)
<u>05-02-06</u>	(Date)

05/09/2006 SSITHB2 00000017 10775266

01 FC:2501 700.00 OP
 02 FC:1504 300.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/775,266	02/10/2004	Larry Sadwick	9902-5752.1US	1269

TITLE OF INVENTION: SHINGED STRUCTURES FOR VACUUM MICROELECTRONICS AND METHODS OF MANUFACTURING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	05/15/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
AL NAZER, LEITH A	2821	315-039300

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Morriss
 2 O'Bryant
 3 Compagni

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature [Signature]

Date 05-02-06

Typed or printed name Paul C. Oestreich

Registration No. 44,983

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/775,266	
	Filing Date	February 10, 2004	
	First Named Inventor	Larry Sadwick et al.	
	Group Art Unit	2821	
	Examiner Name	Al Nazer, Leith A.	
Total Number of Pages in This Submission (including this sheet)	2	Attorney Docket No.	3069.INSY.NP

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Check in the amount of \$ <u>1,000</u> <input type="checkbox"/> Credit card authorization in the amount of \$ <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings <u> </u> sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request <u> </u> month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input checked="" type="checkbox"/> Issue Fee Transmittal	<input type="checkbox"/> Maintenance Fee Transmittal <u> </u> year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Other:
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT		
Attorney for Applicant	Paul C. Oestreich, Registration No. 44,983 MORRISS O'BRYANT COMPAGNI, P.C. 136 South Main Street, Suite 700 Salt Lake City, Utah 84101 (801) 478-0071 telephone; (801) 478-0076 facsimile	
Signature		Date 05-02-06
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